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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No.	:	10/613,033	Confirmation No.	9380
Applicant	:	Nima Ahmadvand, et al.		
Filed	:	July 7, 2003		
TC/A.U.	:	2163		
Examiner	:	VY, Hung T.		
Docket No.	:	50111-21CIP		
Customer No.	:	07380		

Commissioner for Patents
Alexandria, VA 22313-1450
U.S.A.

Dear Sir:

In response to the Office action of June 5, 2006, please amend this application as follows:

Remarks/Arguments begin on page 2 of this paper.

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SMART & BIGGAR
*Intellectual Property & Technology Law***To Fax no.:** (571) 273-8300**P.O. Box 2999, Station D**
55 Metcalfe Street, Suite 900
Ottawa, Canada K1P 5Y6**Page 1 of:** 5**Tel.: (613) 232-2486**
Fax: (613) 232-8440**Attention:** Examiner Hung T. Vy
Group Art Unit 2163**From:** Mr. R. Allan Brett**Date: September 5, 2006****Your file no.:** 10/613,033**Time:****Reply to file no.:** 50111-21CIP**Certificate of Transmission**

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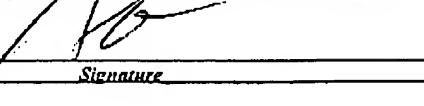
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P.2/6

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AMENDMENT TRANSMITTAL LETTER (Small Entity) Applicant(s): Nima Ahmadvand, et al				Docket No. 50111-21CIP /aba	
Application No.	Filing Date	Examiner	Customer No.	Group Art Unit	Confirmation No.
10/613,033	July 7, 2003	Hung T. Vy	07380	2163	9380
Invention: SYSTEM AND METHOD GENERATING MULTI-WAVELENGTH LASER SOURCE USING HIGHLY NONLINEAR FIBER					
<u>COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application.					
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	29 -	32 =	0	x \$25.00	\$0.00
INDEP. CLAIMS	1 -	4 =	0	x \$100.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 19-2550 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
Dated: September 5, 2006					
 R. Allan Brett Registration No. 40,476					
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